



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#12C
FL
5/7/04

In re Application of: **Brian Joseph McNamara**

Application No.: **09/450,912**

Examiner: **Sheila B. Smith**

Filing Date: **11-29-1999**

Group Art: **2685**

Title: **Dual Band Tuning**

CERTIFICATE OF MAILING

I hereby certify that this correspondence, along with any papers indicated as being enclosed, are being deposited as First Class Mail, postage prepaid, in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 27, 2004.

27 April 2004
Date

[Signature]
Diane A. Sears

Mail Stop Non-Fee Amendment
The Commissioner for Patents
Post Office Box 1450
Alexandria, VA 22313-1450

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Technology Center 2600

RESPONSE TO OFFICE ACTION DATED JANUARY 28, 2004

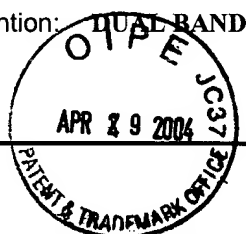
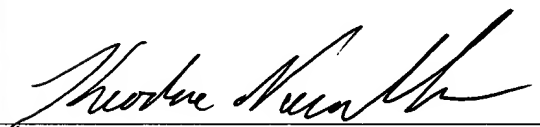
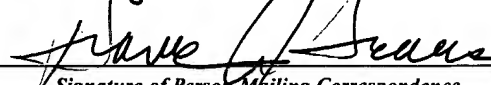
Dear Sir:

In view of the following amendments and remarks responsive to the Office Action dated January 28, 2004, Applicant respectfully requests favorable reconsideration of this application.

Amendments to the specification commence on page 2 of this paper.

Remarks/Arguments commence on page 4 of this paper.

2685

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 17481	
Applicant(s): Brian Joseph McNamara					
Serial No. 09/450,912	Filing Date 11/29/1999		Examiner Sheila B. Smith		Group Art Unit 2685
Invention: DUAL BAND TUNING					
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TO THE COMMISSIONER FOR PATENTS:			Technology Center 2600		
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21 -	21 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 1905425.<div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div><div><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div></div>					
 _____ <i>Signature</i>			Dated: 4.27.04		
Theodore Naccarella, Esquire Registration No. 33,023 Synnestvedt & Lechner LLP 2600 Aramark Tower 1101 Market Street Philadelphia, PA 19107 Telephone: (215) 923-4466 Facsimile: (215) 923-2189			<div>I certify that this document and fee is being deposited on 4/27/2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div> <i>Signature of Person Mailing Correspondence</i></div> <div>Diane A. Sears <i>Typed or Printed Name of Person Mailing Correspondence</i></div>		
CC:					